AWARENESS FOUNDATION

FDA Janet Woodcock Acting Commissioner
10903 New Hampshire Ave
Silver ring
\MD 20993-0002
USA

Date: August 17th 2021

Dear Ms Woodcock

While as physicians and scientists we are supportive of the use of new medical technologies we are united in our belief that any such technologies must be developed in accordance with established timelines, subject to adequate safety testing and protocols, and must be administered only following informed consent of the patient.

It is well established that vaccines have potential to cause injury and death - no vaccine is one hundred percent (100%) safe. Government compensation mechanisms in the USA, UK and EU acknowledge this. It has been well established that safe and effective vaccine development takes time and only with the passage of sufficient time can mid and long term safety data be acquired to determine potential risks and benefits of drug vaccine biologics. It is broadly accepted that vaccine development takes approximately ten (10) years from initial concept to market rollout. Even when a drug is fast tracked, three (3) years is the typical timeline from concept to approval. The SARS-CoV-2 vaccines were developed in less than one (1) year and hastened into circulation prior to thorough animal and tissue testing. Full evaluation of the EUAs or "equivalent status" of these drug vaccine biologics show no statistical reduction in subsequent development of COVID-19 or deaths.

The manufacturers of the SARS-CoV-2 drug vaccine biologics understand and anticipate the risks associated with accelerated vaccine development and have thus insisted on immunity from liability for injury or death. Astra Zeneca senior executive, Ruud Dobber stated "This is a unique situation whereas a company we simply cannot take the risk if in.... four years the vaccine is showing side effects."

In accord with the 1967 International Covenant on Civil and Political Rights (ICCPR) Treaty, the 1947 Nuremberg Code, and the 1964 Declaration of Helsinki; "informed consent" for a medical treatment or intervention requires that a patient must be provided with sufficient information to make an informed decision regarding the risks and benefits of receiving or not receiving a treatment or intervention. As this pertains to drug vaccine biologic agents such information must include a discussion minimally consisting of;

(1) the risk of harm and benefit from the vaccine;

(2) the risk of infection from SARS-CoV-2 following vaccination and the subsequent risk of death from COVID-19 [an InflammoThrombotic Response (ITR) to the infection] following vaccination;

(3) the effectiveness of the vaccines including absolute risk reduction (ARR);

(4) the status of the vaccines including explaining that the vaccines are currently undergoing experimental human trials with no mid or long-term safety data available;

(5) acknowledging what details regarding specific groups are missing from the published and unpublished data;

(6) addressing pre-existing immunity and associated risk of adverse reactions;

(7) an opportunity to ask questions prior to vaccination including discussing specific individuals concerns given the individuals medical and surgical history; and

(8) the avoidance of any perceived coercion of individuals to become vaccinated allotting adequate time for people to voluntarily decide to be vaccinated or not. Failure to obtain this informed consent is a violation of International Treaty Laws, Human Research Codes, medical and legal ethics violations, and the rights of citizens in their individual Nation States. Such violations are subject to Criminal investigation and prosecution in the International Criminal Court (ICC) and Federal Courts of the independent Nation States.

While we acknowledge there are potential problems surrounding the current adverse events reporting systems, the unprecedented volume of adverse events and deaths are alarming both scientifically and medically. We are concerned that there has been and continues to be inadequate scientific rigor, control and investigation of the reported adverse events and deaths resulting from both the InflammoThrombotic Response (ITR) to the drug vaccine biologics, as well as the reported neurologic Prion diseases shown in both animal models and adverse event reporting. These concerns expand into the area of patient treatment of both infections caused by SARS-CoV-2 and the resulting ITR disease known as COVID-19.

It is our considered professional expert opinion that the current risk of serious adverse events and deaths outweigh the potential benefit of the vaccines and thus we cannot support the continued administration of these drug vaccine biologic agents. **Consequently, we call upon you to immediately cease the administration of the SARS-CoV-2 drug vaccine biologic programs.**

Such cessation will provide adequate time for additional safety and efficacy data to be collected to evaluate the true risks and benefits of these drug vaccine biologic agents; in accord with the ICCPR Treaty, the Nuremberg Code, the Declaration of Helsinki, the BWC Treaty, the medical and legal ethics codes established in the independent Nation States and the ICC.

We additionally demand that each of you and your respective governments immediately stop interfering with the practice of medicine; allowing physicians and individuals to determine any and all treatments based upon informed consent and adequately researched and clinically proven treatments.

For the record, a copy of this letter has been sent to the following recipients:

The CDC, JCVI, WHO, and global Nation State governments.

We look forward to receiving your response forthwith. Accordingly signed and submitted this 17th Day of August 2021.

Formally signed on behalf of all the medical experts listed below:

Dr. Richard Fleming PhD, MD

Richard M Fleming, PhD, MD, JD

Professor Dolores Cahill		Dr Joseph Mercola	D.O.
Dr. Ryan Cole	MD	Dr. Lee Merritt	MD
Dmitry Kats	MPH PhD	Dr. Sherri Tenpenny	D.O.
Dr. Tess Lawrie	MBBch PhD	Dr.Richard Urso	MD
Dr.Li-Meng Yan		Dr. Sam White	MBChB. MRCGP
Dr.Peter McCullough	MD	Dr.Vladimir Zelenko	MD